

AMENDED IN ASSEMBLY APRIL 20, 2009

CALIFORNIA LEGISLATURE—2009—10 REGULAR SESSION

## ASSEMBLY BILL

**No. 1289**

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**Introduced by Assembly Member Galgiani**

*(Principal coauthor: Senator Florez)*

**(Coauthor: Assembly Member Fuller)**

*(Coauthor: Senator Maldonado)*

February 27, 2009

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An act to add Section 5023.3 to the Penal Code, relating to prisoners.

### LEGISLATIVE COUNSEL'S DIGEST

AB 1289, as amended, Galgiani. Prisoners: telemedicine.

Existing law, the Telemedicine Development Act of 1996, regulates the practice of telemedicine, defined as the practice of health care delivery, diagnosis, consultation, treatment, transfer of medical data, and education using interactive audio, video, or data communications, by a health care practitioner, as defined. Existing law establishes that *it is the intent of the Legislature that* the Department of Corrections and Rehabilitation operate in the most cost-effective and efficient manner possible when purchasing health care services for inmates.

This bill would declare the Legislature's findings on the use of telemedicine in the state's prisons. The bill would require the department to establish guidelines for the use of telemedicine consultations, use telemedicine for all appropriate consultations, *make use of existing external telemedicine resources, maintain current prison telemedicine programs, as specified*, and establish annual performance targets regarding the use of telemedicine in prisons.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

SECTION 1. Section 5023.3 is added to the Penal Code, to read:

5023.3. (a) The Legislature finds and declares all of the following:

(1) It is the intent of the Legislature to require the Department of Corrections and Rehabilitation to implement the recommendations proposed by the Legislative Analyst's Office relating to the use of telemedicine in state prisons.

(2) The Legislative Analyst's Office found in a February 2006 report that opportunities exist for the department to significantly expand its use of telemedicine in prisons, thereby enhancing public safety, generating cost savings, and improving inmates' access to care.

(3) Telemedicine provides the opportunity to bid out contracts to a larger pool of physicians licensed to practice across the state, rather than only to those contract physicians practicing in the region of a specific prison.

(4) Telemedicine improves inmates' access to health care by enabling correctional systems to expand their provider network to include physicians located outside the immediate vicinity of prisons, particularly for inmates housed in remote areas of the state with shortages of health care.

(5) The department's prison telemedicine program began in 1997 as a pilot project for mental health inmates at Pelican Bay State Prison and was successful at improving inmates' access to mental health care. Accordingly, the department decided to expand the program to provide mental health as well as medical specialty services at other prisons. In 2006, 27 of the state's 33 prisons were equipped to provide telemedicine services.

(6) The department estimates that it saves on average about eight hundred fifty dollars (\$850) in transportation and medical guarding costs for each outside medical visit that is avoided due to telemedicine. In total, approximately four million dollars (\$4,000,000) in transportation and medical guarding costs were avoided in 2004–05 because of the program.

(7) The Legislative Analyst's Office has determined that despite the growth of the department's telemedicine program since 1997, the program is underutilized. The Legislative Analyst's Office has

1 cited two factors that explain why telemedicine is underutilized.  
2 First, the department encourages, but does not require, prison  
3 healthcare staff to use the program when it could be effectively  
4 substitute for offsite medical appointments. Second, the department  
5 offers only a limited number of medical specialties through  
6 telemedicine.

7 (b) In order to maximize the benefits that come with the use of  
8 telemedicine in the state's prisons, the department shall do all of  
9 the following:

10 (1) Require prisons to use the prison telemedicine program for  
11 all medical consultations that are appropriate for telemedicine  
12 consultations.

13 (2) *To the extent feasible, make use of existing external*  
14 *telemedicine resources.*

15 (3) *Maintain and continue to implement the prison telemedicine*  
16 *programs established by the court-appointed receiver, unless the*  
17 *department has identified more cost-effective alternatives for*  
18 *providing health care services to inmates.*

19 ~~(2)~~

20 (4) Establish guidelines concerning the specific conditions under  
21 which telemedicine consultations *must* be used in place of outside  
22 medical visits. ~~Medical specialty appointments that meet these~~  
23 ~~criteria shall be provided via telemedicine.~~

24 ~~(3)~~

25 (5) Establish annual performance targets ~~beginning in 2010-11~~  
26 for prisons regarding the total number and percentage of medical  
27 specialty consultations that are conducted by telemedicine rather  
28 than at community medical facilities. The department shall report  
29 to the Legislature, annually, on its plans and performance. The  
30 ultimate goal of these performance targets shall be to limit  
31 in-person consultations in the community to only those that, due  
32 to the nature of the medical problem, must be conducted in a  
33 face-to-face encounter between physician and inmate.